## Risk assessment for venous thromboembolism (VTE)



|  |
| --- |
| **AFFIX LABEL HERE IF AVAILABLE**NHS No: ………………………………………………………District No: ……………………………………………………Surname: ……………………………………………………..Forename(s): ………………………………………………… Address: ………………………………………………………………………………………………………………………….DoB: ………………………………………………………….. |

**Risk Assessment for Venous thromboembolism (VTE) – Nursing Responsibility**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Mobility – all patients (tick one box)** | **Tick** |  | **Tick** |  | **Tick** |
|  | Patient expected to have on-going reduced mobility relative to normal state |  | Patient NOT expected to have significantly reduced mobility relative to normal state |  |
| **Assess for thrombosis and bleeding risk below** | **Risk assessment now complete** |  |
| **Thrombosis risk** |
| **Patient related** | **Tick** | **Admission related** | **Tick** |
| Active cancer or cancer treatment |  | Significantly reduced mobility for 3 days or more |  |
| Age > 60 |  | Surgery with significant reduction in mobility |  |
| Dehydration |  | Hip or Knee replacement |  |
| Known thrombophilia’s  |  | Hip Fracture |  |
| Obesity (BMI > 30kg/m2 |  | Total anaesthetic + surgical time >90 minutes |  |
| One or more significant medical comorbidities (eg heart disease; metabolic, endocrine or respiratory pathologies: acute infectious diseases: inflammatory conditions, injecting drug use) |  | Surgery involving pelvis, lower limb with a total anaesthetic + surgical time >60 minute  |  |
| Personal history or first-degree relative with a history of VTE |  | Acute surgical admission with inflammatory or intra-abdominal condition |  |
| Use of hormone replacement therapy |  |  |  |
| Use of oestrogen- containing contraceptive therapy |  |  |  |
| Varicose veins with phlebitis |  |  |  |
| Pregnancy or < 6 weeks post-partum (see NICE guidance for specific risk factors) |  | Critical Care admission |  |
| **Bleeding risk** |
| **Patient related** | **Tick** | **Admission related** | **Tick** |
| Active bleeding |  | Other procedure with high bleeding risk |  |
| Acquired bleeding disorders (such as acute liver failure) |  | Neurosurgery, spinal surgery or eye surgery |  |
| Concurrent use of anticoagulants known to increase the risk of bleeding (such as warfarin with INR > 2) |  | Lumbar puncture/epidural/spinal anaesthesia expected within 12 hours |  |
| Thrombocytopenia (platelets < 75 x 109/l) |  | Lumbar puncture/epidural/spinal anaesthesia within the previous 4 hours |  |
| Uncontrolled systolic hypertension (230/120 mmHg or higher) |  |  |  |
| Untreated inherited bleeding disorders (such as haemophilia and von Willebrand’s disease |  |  |  |
| **Signature: ……………………………….. Print Name: ………………….. Designation: …………………………****Date: ………………………… Time: …………………………** |
| **Clinical Decision – Medical/Nursing Staff Responsibility** |
|  | **Tick** |  | **Tick** |
| Low risk, no thromboprophylaxis required |  | High risk, thromboprophylaxis indicated |  |
| Thromboprophylaxis contraindicated |  | **VTE patient information leaflet given** |  |
| **Signature: ……………………………….. Print Name: ……………………………… Designation: ………………………..****Date: ……………………….. Time: …………………………** |